Status::

APPLICATION DATA SHEET

REGULAR

UTILITY

APPLICATION INFORMATION

Application Type:: Subject Matter::

CD-ROM or CD-R?:: NONE

Title:: SYSTEM AND METHOD FOR USING

CARDS FOR SPONSORED PROGRAMS

Attorney Docket Number:: 213555US25

INVENTOR INFORMATION

Applicant Authority Type:: **INVENTOR** Primary Citizenship Country:: **United States**

FULL CAPACITY Status::

Given Name:: Steve Family Name:: **PHILLIPS**

City of Residence:: Lansdowne

State or Province of Residence:: Pennsylvania Country of Residence:: **United States**

Street of Mailing Address:: 105 Walsh Road

City of Mailing Address:: Lansdowne State or Province of Mailing Address:: Pennsylvania

Country of Mailing Address:: **United States**

Postal or Zip Code of Mailing Address:: 19050

Applicant Authority Type:: INVENTOR Primary Citizenship Country:: **United States**

FULL CAPACITY Given Name:: Joe RICE

Family Name:: City of Residence:: Point Pleasant Beach

State or Province of Residence:: New Jersey Country of Residence:: **United States**

Street of Mailing Address:: 302 Sudbury Road City of Mailing Address:: Point Pleasant Beach

State or Province of Mailing Address:: New Jersey Country of Mailing Address:: **United States**

Postal or Zip Code of Mailing Address:: 08742 Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States
Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

State or Province of Residence::

Linda

MABREY

Oldsmar

Florida

Country of Residence:: United States
Street of Mailing Address:: 1662 Cross Tee Court

City of Mailing Address:: Oldsmar
State or Province of Mailing Address:: Florida

Country of Mailing Address:: United States

Postal or Zip Code of Mailing Address:: 34677

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States
Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

State or Province of Residence::

New Jersey

Country of Residence:: United States
Street of Mailing Address:: 2132 Butternut Road

City of Mailing Address::

State or Province of Mailing Address::

New Jersey

United States

Postal or Zip Code of Mailing Address:: 08750

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States
Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

St. Petersburg

State or Province of Residence:: Florida

Country of Residence:: United States
Street of Mailing Address:: 5166 Heresehee

Street of Mailing Address:: 5166 Horseshoe Place NE City of Mailing Address:: St. Petersburg

State or Province of Mailing Address:: Florida

Country of Mailing Address:: United States

Postal or Zip Code of Mailing Address:: 33703

Applicant Authority Type:: **INVENTOR Primary Citizenship Country:: United States** Status:: **FULL CAPACITY**

Given Name::

Jennifer Family Name:: **LEE-EMMONS**

City of Residence:: Clearwater State or Province of Residence:: Florida

Country of Residence:: **United States**

Street of Mailing Address:: 3267 Mulberry Drive

City of Mailing Address:: Clearwater

State or Province of Mailing Address:: Florida

Country of Mailing Address:: **United States**

Postal or Zip Code of Mailing Address:: 33761

Applicant Authority Type:: INVENTOR Primary Citizenship Country:: **United States**

Status:: **FULL CAPACITY** Given Name:: John

Family Name:: BASTONE City of Residence:: Temple Terrace

State or Province of Residence:: Florida

Country of Residence:: **United States**

Street of Mailing Address:: 213 Deer Park Avenue

City of Mailing Address:: Temple Terrace State or Province of Mailing Address:: Florida

Country of Mailing Address:: **United States**

Postal or Zip Code of Mailing Address:: 33617

Applicant Authority Type:: **INVENTOR** Primary Citizenship Country:: **United States**

Status:: **FULL CAPACITY**

Given Name:: KJ

Family Name:: **PERRON** City of Residence:: **Neptune City**

State or Province of Residence:: **New Jersey** Country of Residence:: **United States**

Street of Mailing Address:: 42 Evergreen Avenue

City of Mailing Address:: **Neptune City** State or Province of Mailing Address::

New Jersey

Country of Mailing Address::

United States

Postal or Zip Code of Mailing Address::

07753

CORRESPONDENCE INFORMATION

Correspondence Customer Number::

22850

REPRESENTATIVE INFORMATION

Representative Customer Number::

22850

ASSIGNMENT INFORMATION

Assignee Name::

CATALINA MARKETING

INTERNATIONAL, INC.

Street of Mailing Address::

200 CARILLON PARKWAY

City of Mailing Address::

ST. PETERSBURG FLORIDA

State or Province of Mailing Address::

U.S.A.

Country of Mailing Address::

0.0.7.

Postal or Zip Code of Mailing Address::

33716